

## Perinatal Psychiatry Network Psychiatrists

### **ARMADALE**

**Dr Michael Block**

97 Wattletree Road  
Armadale VIC 3143  
P 0411 233 709  
F 9509 6096  
E [deephought@optusnet.com.au](mailto:deephought@optusnet.com.au)

**To refer to Michael**

Initial email contact preferred for both professionals and patients. Referral letter required.

### **CAULFIELD NORTH**

**Dr Klara Szego**

94 Kooyong Road  
Caulfield North VIC 3161  
P 9509 2858  
F 9576 2521

**To refer to Klara**

Personal communication from referring doctors preferred. Referral letter required.

### **FITZROY**

**Dr Edna Lekgabe**

Gertrude Street Clinic  
16 Gertrude Street  
Fitzroy VIC 3065  
P 9419 3001  
F 9419 3306  
E [gertrudestreet@bigpond.com](mailto:gertrudestreet@bigpond.com)

**To refer to Edna**

Referral letter and communication via phone/email/fax preferred. Referral letter required.

**Dr Yasaman Adli**

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16 Gertrude Street  
Fitzroy VIC 3065  
P 9419 3001  
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E [gertrudestreet@bigpond.com](mailto:gertrudestreet@bigpond.com)

**To refer to Yasaman**

Referral letter from a treating doctor is required.

## **HEIDELBERG**

**Dr Matthew Roberts**

80 Mount Street

Heidelberg VIC 3084

**P** 9459 1100

**F** 9459 0300

**E** doctormatthewroberts@gmail.com

### **To refer to Matthew**

Referral via email or phone. Referral letter required.

## **NEWPORT**

**Dr Juliana Loming**

The Village Family Mental Health Specialists

473 Melbourne Rd

Newport

Vic 3015

**P** 9399 5506

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**E** admin@thevillageclinic.com.au

### **To refer to Juliana**

Referral letter and communication via phone/email/fax preferred. Referral letter required.

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**F** 9399 5945

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### **To refer to Edna**

Referral letter and communication via phone/email/fax preferred. Referral letter required.

## **SOUTH MELBOURNE**

**Dr Spiri Katsenos**

The South Melbourne Consulting Suites

Level 4/66 Albert Rd

South Melbourne, 3205

**P** 9645 7373

**F** 9645 8786

### **To refer to Spiri**

Initial contact via phone is highly recommended for referring health care professionals and patients. Referral letter required.

## **WANGARATTA**

**Dr Michael Block**

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Wangaratta VIC 3677

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**E** [deepthought@optusnet.com.au](mailto:deepthought@optusnet.com.au)

### **To refer to Michael**

Initial email contact preferred for both professionals and patients. Referral letter required.

## **TELEHEALTH ONLY**

**Dr Cathrin Kusuma**

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**E** [info@parentinmind.com.au](mailto:info@parentinmind.com.au)

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### **To refer to Cathrin**

Personal communication from referring doctors preferred. Referral letter required.